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Bib Data Sheet

CONFIRMATION NO. 3877

SERIAL NUMBER 10/036,070	FILING DATE 10/19/2001 RULE	CLASS 705	GROUP ART UNIT 2161	ATTORNEY DOCKET NO. M-11651 US
APPLICANTS Doug Azzarito, Round Rock, TX; Robert A. Rose, Hillsboro, OR; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/25/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 27
			INDEPENDENT CLAIMS 3	
ADDRESS Stephen A. Terrile SKJERVEN MORRILL MacPHERSON LLP Suite 700 25 Metro Drive San Jose , CA 95110-1349				
TITLE Interval-based scheduling of USB transactions				
FILING FEE RECEIVED 866	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees		
		<input type="checkbox"/> 1.16 Fees (Filing)		
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		
		<input type="checkbox"/> 1.18 Fees (Issue)		
		<input type="checkbox"/> Other _____		
		<input type="checkbox"/> Credit		



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BIBDATASHEET

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Bib Data Sheet

SERIAL NUMBER 10/036,070	FILING DATE 10/19/2001 RULE	CLASS 710	GROUP ART UNIT 2111	ATTORNEY DOCKET NO. M-11651 US
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APPLICANTS

Doug Azzarito, Round Rock, TX;

Robert A. Rose, Hillsboro, OR;

** CONTINUING DATA *****

none RP

** FOREIGN APPLICATIONS *****

*none RP*IF REQUIRED, FOREIGN FILING LICENSE
GRANTED

** 01/25/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

23640
BAKER BOTTS, LLP
910 LOUISIANA
HOUSTON, TX
77002-4995

TITLE

Interval-based scheduling of USB transactions

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED 866		<input type="checkbox"/> 1.16 Fees (Filing)